



AMERICAN PROTECTION GROUP

8551 Vesper Ave. Panorama City, CA 91402
 State Licensed & Insured / <http://apg-svcs.com>
 (818) 279-2433 24 Hours Dispatch Center (818) 698-1651 Fax

APG MARITIME APPLICATION

Position applying for:

Human Resources <input type="checkbox"/>	Compliance Officer <input type="checkbox"/>	Maritime Director of Ops (MDO) <input type="checkbox"/>	Maritime Shift Supervisor (MSS) <input type="checkbox"/>
Travel Coordinator <input type="checkbox"/>	Certified Accountant <input type="checkbox"/>	Maritime Operation Manager (MOM) <input type="checkbox"/>	Maritime Relief Officer (MRO) <input type="checkbox"/>
Recruiter Specialist <input type="checkbox"/>	Certified EMT <input type="checkbox"/>	Maritime Training Officer (MTO) <input type="checkbox"/>	Maritime Security Lead (MSL) <input type="checkbox"/>
Manual Writer <input type="checkbox"/>	Pilot (Planes /Helicopters) <input type="checkbox"/>	Maritime Armory Officer (MAO) Maritime Watch Commander (MWC) <input type="checkbox"/>	Maritime Security Officer (MSO) <input type="checkbox"/>
Contract Specialist <input type="checkbox"/>	Pilot (Boats/Ships) <input type="checkbox"/>	Maritime Watch Commander (MWC) <input type="checkbox"/>	Other Maritime Watch Commander (MWC) <input type="checkbox"/>

Full Name: _____ Address: _____
 City/Province: _____ Zip: _____ Home Phone: _____ Cell Phone: _____

Please answer the following questions, below.

Do you have valid Passport: YES__ NO__ Country: _____ Expires on: _____
 Are you a Dual Citizen: YES__ NO__ Country 1: _____ Country 2: _____
 Do you have a valid & current driver license: YES__ NO__ (if not, can you obtain one?) YES__ NO__
 (What country and state) _____, License # _____ expires on: _____
 What languages do you speak: _____

If your applying for any type of Maritime Security Protection Details, please answer the following, if applying for anything else please go to page 2.

Do you hold a valid work visa for the United States: YES__ NO__ (if not, can you obtain one?) YES__ NO__
 Do you hold a (Top secret, secret or other) clearance: YES__ NO__
 Do you hold a valid & current Transportation Worker Identification Credential (TWIC Card): YES__ NO__
 (if not, can you obtain one?) YES__ NO__
 Do you hold a valid & current STCW 95 Certificate: YES__ NO__ (if not, can you obtain one?) YES__ NO__
 Do you hold a valid & current Seafarers Medical Certificate (ENG1): YES__ NO__ (if not, can you obtain one?) YES__ NO__
 Do you hold a valid & current Yellow Fever Vaccination certificate: YES__ NO__ (if not, can you obtain one?) YES__ NO__
 Do you hold a valid & current Trauma/1st Aid/CPR/AED certification: YES__ NO__ (if not, can you obtain one?) YES__ NO__
 Do you hold a valid & current Mental Health Clearance: YES__ NO__ (if not, can you obtain one?) YES__ NO__
 Do you hold a valid & current MSO Course Certification: YES__ NO__ (if not, can you obtain one?) YES__ NO__
 Do you hold a valid & current Ship Security Officer Certification: YES__ NO__ (if not, can you obtain one?) YES__ NO__
 Do you hold a valid & current Firearms Competency Certificate: YES__ NO__ (if not, can you obtain one?) YES__ NO__
 Do you hold a valid & current Texas Dept of Public Safety Security Guard card: YES__ NO__ ((if not, can you obtain one?) YES__ NO__
 Do you have a DD214 with an Honorable Discharge: YES__ NO__ if Yes which branch(s) _____



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APG MARITIME APPLICATION (pg 2)

Please provide us with the following:

Where did you get your Maritime Security Training and/or certifications from: _____

Did you have any law enforcement training and/or military training and from what agency(ies): _____

What weapons are you competent in (please name both handguns and rifles): _____

Do you hold any permits, licenses and/or Conceal Carry: Yes___ No___ Agency Name: _____ Exp: _____
Name type of permit/license and what calibers are permitted on document: _____
Have you ever had your permit/license suspended, revoked and why: Yes___ No___ if yes, explain: _____

Do you hold any permits, licenses in security: Yes___ No___ Type: _____
Do you have any expertise in field and what are they: _____

Are you willing to undergo any and all maritime certifications prior to deployment for this position: Yes___ No___ if not, explain: _____

Have you had any type of leadership roles or rank, if yes please explain, if no, please continue to the next question: _____

There are several medical training and certifications required for each position available, are you willing to fulfill them prior to deployment: Yes___ No___ if no, please explain: _____

As a Maritime Security Contractor Employee (MSCE) you will be asked to undergo a 6-month rotation deployment with 6-months off. Are you prepared to underdo this time to be assigned to a Oil/Gas Rig and/or Ship/Boat or a combo of both to be eligible for consideration for this position: Yes___ No___ if no please explain: _____

Are you able to carry weight of 50 pounds or more: Yes___ No___ if not please explain: _____

Do you have any medical conditions that may impair your ability to conduct operations on a Oil/Gas Rig or Ship/Boat: Yes___ No___ if yes please explain: _____



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APG MARITIME APPLICATION (pg 3)

The position(s) you may be applying for may required you to engage an outside group/individual(s) who may bring bodily harm to you or to your team. Are you willing to engage the group/individual under the rules of engagement until the threat has been suppressed or no longer a threat: Yes___ No___ if no please explain:_____

While deployed on any assignment by the Maritime Security Contractor (MSC) you will be required to hold a station or position for a period, which may require you to stand up for the duration of your assigned time at that station or position. Are you willing and able to fulfill this without any issues (Breaks are provided) but time can weight heavily on some people to stand up for any long duration. Are you able to fulfill this: Yes___ No___ if not please explain:_____

Do you have any medical condition such as "Motion Sickness": Yes___ No___ if yes, please explain: _____

Are you required to wear corrective lens to perform your duties: Yes___ No___ if yes, please explain:_____

Are you willing to undergo a mental screening/evaluation to be cleared for deployment: Yes___ No___ if no, please explain:_____

Due to the different climates you may be subject to on an Oil/Gas Rig and/or Ship/Boat are there any limitation or handicaps that we should be aware of such as cold climates vs. hot climates, wet conditions to dry hot conditions etc.: Yes___ No___ if yes please explain:_____

When was the last time you were at a hospital or emergency clinic and for what reason(s): _____

Weapons & Medical Training:

Are you certified in Mace and/or Pepper Spray (OCAT): Yes___ No___

Are you certified in Baton/PR 24: Yes___ No___

Are you certified as a EMT: Yes___ No___

Are you certified in CPR: Yes___ No___

Are you certified in AED: Yes___ No___

Are you certified in First Aid: Yes___ No___

Are you certified in Advance First Aid: Yes___ No___

NATIONAL HQ 8551 Vesper Ave. Panorama City, CA 91402

CA St. Lic. PPO #17466, PI #29028, ACO 7530 PPB 6369, 6462, 6472, 6540 / AZ St. Lic. DPS 1675056 / FL St. Lic. A 1600214 & B 1600264

NV St. Lic. PILB 2075B / TX St. Lic. DPS C0623101 / NM St. Lic. Pending

(888) 519-2224 Toll Free Sales / Dispatch Call Center (818) 698-1651 Fax www.apg-svcs.com

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APG MARITIME APPLICATION (pg 4)

When you were hired on, were you provided employment contract to perform services or hired as a subcontracted contractor?

What was your compensation hourly rate when you were first hired on? _____, name the company benefits in detail you were provided, if any? _____

What was your compensation hourly rate when you finished your assignment? _____ How long were you on? _____

Were you provided a bonus of any kind for your outstanding performance? Yes___ No___ if yes, please explain: _____

Have you been trained and certified on a ship and/or offshore oil/gas rig? Yes___ No___ if yes, please explain: _____

What additional training were you asked to receive when you were hired on if any? _____

Have you ever had any issues with obtaining a work permit visa in any stationed country you were deployed to if any? Yes___ No___ if yes, please explain: _____

(MANAGEMENT QUESTION) – if your applying for any leadership role, please answer the below questions. If not, please skip the next 2 questions.

(1) Please describe the duties you were responsible for in your management role? _____

(2) Please describe your training you had undergone to reach this management role? _____

Have you work on any type of offshore oil/gas rig and for what length of time were you deployed on the platform? Yes___ No___ if yes, please explain: _____

What has been the longest deployment on a ship and/or oil/gas rig? _____ and what is the shortest? _____

On the ship and/or oil/gas rig what were the primary duties you were responsible for? _____

How often were you required to report your position and status? _____

What were your given protocols to follow to in a threat to the ship and or oil/gas rig? _____

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APG MARITIME APPLICATION (pg 5)

Please place you're the compensation rate you were last hired on and the position you worked.

Human Resources Start \$ _____ End\$ _____	Compliance Officer Start \$ _____ End\$ _____	Maritime Director of Ops (MDO) Start \$ _____ End\$ _____	Maritime Shift Supervisor (MSS) Start \$ _____ End\$ _____
Travel Coordinator Start \$ _____ End\$ _____	Certified Accountant Start \$ _____ End\$ _____	Maritime Operation Manager (MOM) Start \$ _____ End\$ _____	Maritime Relief Officer (MRO) Start \$ _____ End\$ _____
Recruiter Specialist Start \$ _____ End\$ _____	Certified EMT Start \$ _____ End\$ _____	Maritime Training Officer (MTO) Start \$ _____ End\$ _____	Maritime Security Lead (MSL) Start \$ _____ End\$ _____
Manual Writer Start \$ _____ End\$ _____	Pilot (Planes /Helicopters) Start \$ _____ End\$ _____	Maritime Armory Officer (MAO) Maritime Watch Commander (MWC) Start \$ _____ End\$ _____	Maritime Security Officer (MSO) Start \$ _____ End\$ _____
Contract Specialist Start \$ _____ End\$ _____	Pilot (Boats/Ships) Start \$ _____ End\$ _____	Maritime Watch Commander (MWC) Start \$ _____ End\$ _____	Other Maritime Watch Commander (MWC) Start \$ _____ End\$ _____

Can you please provide us with a short biography of yourself with details of your experience and accomplishments you have obtained in your past: _____

Why would you be a great candidate for the position you have applied for? _____

Please state why you are interested in APG, please be detail in this answer and provide us how you heard about us? _____



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APG MARITIME APPLICATION (pg 5)

Statement of Facts

I _____ understand that this completed application which I am providing to American Protection Group, Inc. (APG) and all information I have stated on the application is truthful and accurate. Any information which has been falsified, mislead, and/or inaccurate will result in the application to be disqualified for consideration for employment with APG.

I furthermore agree and understand that this application may be furnished to the client for review to provide the experience level and knowledge/expertise of the position I am applying for.

I agree to provide American Protection Group, Inc (APG) with a copy of all current id's, passport, licenses, permits, certifications, including certification of training. A copy, if required shall be sent to their client with my full permission to share those documents too.

By signing this application, I understand that I am providing American Protection Group, Inc (APG) authorization to conduct a full criminal, civil and employment investigation. All findings shall become part of my application and will be used to assist in the evaluation of my background for this position.

Applicant Name Date

Applicant Signature

Electronic Signature or Acknowledgement. This application may be executed in any number of counterparts, each of which shall be deemed an original as against any party whose signature appears thereon, and all of which together shall constitute one and the same instrument. The provision of photographic or facsimile copies, or electronic signature, confirmation or acknowledgement of or by a party, shall constitute an effective original signature of a party for all purposes under this application, and may be used with the same effect as manually signed originals of this application for any purpose.